Continuous sanctions monitoring.

High quality provider network maintenance.

SanctionsTrack® gives your organization the information needed to maintain a high quality provider network. Monitoring provider sanctions requires comprehensive, national data — generated quickly and on demand. While most state statutes require provider re-credentialing only once every three years, the HHS Office of the Inspector General (OIG) issues new sanctions weekly. State licensing boards also take actions regularly.

Providers sanctioned in one state can quickly move and open an office in another, affecting network quality and member service. Healthcare organizations that comply with federal and state provider network requirements can avoid costly penalties.

Easier, more robust monitoring of your entire network is here. SanctionsTrack® is an automated, continuous sanctions monitoring solution from CAQH, designed to seamlessly integrate with CAQH ProView™ to enhance the value of your provider data. SanctionsTrack provides more of the information healthcare organizations need to assess who is caring for their members and patients.

— Meets all NCQA factors for a delegation agreement as stated in CR 12, Element A of the 2004/2005 MCO, PPO and MBHO Standards and Guidelines.

— Automates the manual process of checking licensing boards, OPM and OIG, and matching for provider disciplinary actions.

— Reduces hours of staff time, eliminates redundant processes and improves results related to sanctions monitoring.

— Continuously queries nearly 500 state licensing boards and other Federal sources for sanctions and disciplinary actions.

— Identifies providers with state licensing actions via centralized data collection.

— Offers timely information to use in provider credentialing decisions.

— Improves the quality of health plan networks by helping to ensure that sanctioned providers are quickly identified and excluded as appropriate.

The average time between a licensing board posting an action and SanctionsTrack reporting the event is 4.5 days.

How SanctionsTrack and CAQH ProView Work Together

SanctionsTrack consolidates and electronically reports all provider sanctions and related license actions in the United States. It works in conjunction with CAQH ProView in the following ways:

— Uploads data to CAQH ProView nightly and automatically flags any sanctioned providers on an organization's roster.

— Shares all provider sanctioned actions to reconcile with a healthcare organization's internal files, both in and out of network, for claims administration.

— Enables custom online searches and extracts information on demand in several ways — by provider name, state, sanctions within a specific date range, or filtered by providers with a specific sanction type.

SanctionsTrack Benefits

— Continuously monitors nearly 500 state licensing boards and other Federal sources for sanctions and disciplinary actions. The average time between a licensing board posting an action and CAQH reporting the event is 4.5 days.

— Identifies providers with multiple state license actions via centralized, timely data collection. Find out early if a sanctioned provider is setting up a practice in a different location.

— Automatically flags all sanctioned providers on the roster of a participating organization.

— Deemed an NCQA primary source that can help meet the NCQA CVO Certification Option, CVO13, for ongoing monitoring of practitioner sanctions between re-credentialing cycles.

Who can use SanctionsTrack?

Organizations that use CAQH ProView — health plans, hospitals and provider practices — can use SanctionsTrack for credentialing network providers, network claims validation, and fraud and abuse detection programs.

Learn more.

Maximize your use of CAQH ProView: start saving time and money with SanctionsTrack. Contact your CAQH account manager to schedule a consultation and demonstration. Visit www.caqh.org/solutions/sanctionstrack to learn more.

SanctionsTrack helps organizations eliminate redundant data gathering and follow-up research for sanction notices.